

**PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: Mail

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(703) 746-4000

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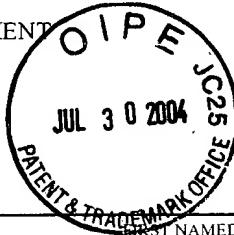
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21967 7590 07/27/2004

HUNTON & WILLIAMS LLP  
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08/02/2004 3DIRETAR 00000079 03722387

01 FC:2501

665.00 0P



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**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/722,587	11/28/2000	Jean Francois Bloch	746220.0003 (58763.000003)	6154

TITLE OF INVENTION: PROCESS FOR DETERMINATION OF THE ACTIVITY OF A SUBSTANCE USING AN IN VITRO FUNCTIONAL TEST

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	10/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KETTER, JAMES S	1636	435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Hunton & Williams LLP

2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Proteus S.A.

Nimes, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0206 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature)

(Date)

David B. Miligan, Reg. # 42,893 07/30/04

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



Patent Application No.: 09/722,587  
Attorney Docket No.: 58763.000003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application Of: )  
Jean François BLOCH et al. ) Group Art Unit: 1636  
Application Number: 09/722,587 ) Examiner: James S. Ketter  
Filed: November 28, 2000 ) Confirmation No.: 6164  
For: PROCESS FOR DETERMINATION OF THE ACTIVITY OF A SUBSTANCE  
USING AN IN VITRO FUNCTIONAL TEST

**ISSUE FEE PAYMENT TRANSMITTAL**

**Mail Stop Issue Fee**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In accordance with the Notice of Allowance and Issue Fee Due mailed July 27, 2004, Applicant is submitting herewith the Issue Fee Transmittal (Part B) in the above-captioned application.

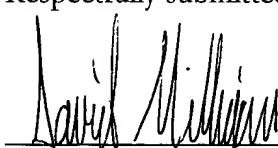
A check in the amount of \$665.00 for a small entity is attached to cover the Issue Fee.

In the event any variance exists between the amount enclosed and the Patent Office charges, please charge or credit any difference to the undersigned's Deposit Account No. 50-0206.

Dated: July 30, 2004

By:

Respectfully submitted,

  
\_\_\_\_\_  
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